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Bib Data Sheet

CONFIRMATION NO. 9014

<b>SERIAL NUMBER</b> 09/472,630	<b>FILING DATE</b> 12/27/1999 <b>RULE</b>	<b>CLASS</b> 386	<b>GROUP ART UNIT</b> 2615	<b>ATTORNEY DOCKET NO.</b> A4-4291
<b>APPLICANTS</b> DARREN NEUMAN, SAN JOSE, CA; BRETT GRANDBOIS, FREMONT, CA;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/04/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 24319				
<b>TITLE</b> SYSTEM AND METHOD FOR COMMUNICATING IMAGES TO A REMOVABLE MEDIA DEVICE				
<b>FILING FEE RECEIVED</b> 760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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## APPLICANTS

DARREN NEUMAN, SAN JOSE, CA;

BRETT GRANDBOIS, FREMONT, CA;

\*\* CONTINUING DATA \*\*\*\*\* *lew* *none*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *lew* *none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/04/2000

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Verified and Acknowledged <i>lew</i> Examiner's Signature Initials				


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## TITLE

SYSTEM AND METHOD FOR COMMUNICATING IMAGES TO A REMOVABLE MEDIA DEVICE

FILING FEE  RECEIVED 862	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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